

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	45	1/27/01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 Interference
 Adversely Affected
 Objected

BEST AVAILABLE COPY

Claim	Date
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Original	
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If more than 150 claims or 10 actions
 staple additional sheet here

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09/744432